



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/683880-Conf. #7888
		Filing Date	October 9, 2003
		First Named Inventor	Kun Ping LU
		Art Unit	1642
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	BIZ-045CPCN

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Remarks	
<input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

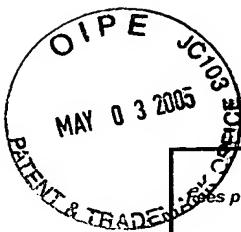
Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Cynthia L. Kanik, Ph.D.		
Date	May 3, 2005	Reg. No.	37,320

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV608866778US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 3, 2005

Signature:

(Cynthia L. Kanik, Ph.D.)



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 4,550.00)
**Complete if Known**

Application Number	10/683880-Conf. #7888
Filing Date	October 9, 2003
First Named Inventor	Kun Ping LU
Examiner Name	Not Yet Assigned
Art Unit	1642
Attorney Docket No.	BIZ-045CPCN

**METHOD OF PAYMENT** (check all that apply)
 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments
**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	790.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues) Fee (\$) Small Entity  
 Each independent claim over 3 (including Reissues) Fee (\$) Small Entity  
 Multiple dependent claims Fee (\$) Small Entity

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
20	-20 = 0	× 50.00	= 00.00

<u>Multiple Dependent Claims</u>	
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
11	-3 = 8	× 200.00	= 1,600.00

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	-100 =	/50 (round up to a whole number)	×	=

**4. OTHER FEE(S)**

Other (e.g., late filing surcharge): 2255 Extension for response within fifth month Fee Paid (\$) 2,160.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	37,320	Telephone	(617) 227-7400
Name (Print/Type)	Cynthia L. Kanik, Ph.D.			Date	May 3, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV608866778US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 3, 2005

Signature:

(Cynthia L. Kanik, Ph.D.)



UNITED STATES PATENT AND TRADEMARK OFFICE

05-05-05  
IFW

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/683,880	10/09/2003	Kun Ping Lu	BIZ-045CPCN

00959  
LAHIVE & COCKFIELD, LLP.  
28 STATE STREET  
BOSTON, MA 02109



CONFIRMATION NO. 7888  
FORMALITIES LETTER  
  
\*OC000000014021735\*

Date Mailed: 10/07/2004.

**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

05/06/2005 MWOLIDGE1 00000087 120080 10683880      FILED UNDER 37 CFR 1.53(b)

01 FC:1001      790.00 DA  
02 FC:1051      130.00 DA  
03 FC:1201      1600.00 DA

*Filing Date Granted*

**Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 395 to complete the basic filing fee for a small entity.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of **\$1617** as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

**SUMMARY OF FEES DUE:**

Total additional fee(s) required for this application is **\$2077** for a Small Entity

- \$395 Statutory basic filing fee.
- \$65 Late oath or declaration Surcharge.
- Total additional claim fee(s) for this application is **\$1617**
  - \$792 for 18 independent claims over 3.

- **\$675** for **75** total claims over 20.
- **\$150** for multiple dependent claim surcharge.

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

---

*A copy of this notice **MUST** be returned with the reply.*

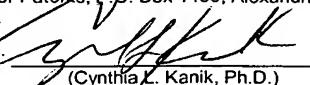
*TSegevach*  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

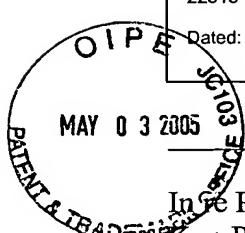
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV608866778US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 3, 2005

Signature: 

(Cynthia L. Kanik, Ph.D.)

Docket No.: BIZ-045CPCN  
(PATENT)



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Kun Ping Lu *et al.*

Application No.: 10/683880

Confirmation No.: 7888

Filed: October 9, 2003

Art Unit: 1642

For: PIN1 AS A MARKER FOR ABNORMAL  
CELL GROWTH

Examiner: Not Yet Assigned

### **RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION**

MS Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice to File Missing Parts of Application -- Filing Date Granted mailed October 7, 2004, Applicant respectfully submits a Petition for Extension of Time, a First Preliminary Amendment, and Part 2 Copy of Notice.

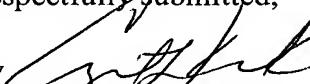
The Notice indicates that a Declaration, along with the appropriate late fee, must be submitted in response to the Notice. Applicants respectfully submit that the Declaration was submitted on along with the application on October 9, 2003. A copy of the Declaration and the date-stamped postcard indicating the receipt of the Declaration by the U.S. Patent Office on October 9, 2003 are enclosed herewith. Accordingly, the late fee for submitting the Declaration is not being paid at this time.

Please charge our Deposit Account No. 12-0080 in the amount of \$4,550.00 covering the fee set forth in 37 CFR 1.17(a)(4). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. BIZ-045CPCN. A duplicate copy of this paper is enclosed.

Dated: May 3, 2005

Respectfully submitted,

By

  
Cynthia L. Kamik, Ph.D.  
Registration No.: 37,320  
LAHIVE & COCKFIELD, LLP  
28 State Street  
Boston, Massachusetts 02109  
(617) 227-7400  
(617) 742-4214 (Fax)  
Attorney/Agent For Applicant